

CLAIMS AS FILED - PART I

Application or Docket Number

10/700671

| CLAIMS | (Column 1) | (Column 2) |
|-------------------------|---------------|--------------------------|
| | 32 | |
| | NUMBER FILED | NUMBER EXTRA |
| ARGEABLE CLAIMS | 32 minus 20 = | 12 |
| ENT CLAIMS | 2 minus 3 = | |
| DEPENDENT CLAIM PRESENT | | <input type="checkbox"/> |

Precedence in column 1 is less than zero, enter "0" in column 2

| SMALL ENTITY TYPE <input type="checkbox"/> | | OR | OTHER THAN SMALL ENTITY | |
|--|--------|----|-------------------------|--------|
| RATE | FEE | | RATE | FEE |
| BASIC FEE | 385.00 | OR | BASIC FEE | 770.00 |
| XS 9= | 108.00 | OR | XS18= | |
| X43= | | OR | X86= | |
| +145= | | OR | +290= | |
| TOTAL | 493.00 | OR | TOTAL | |

CLAIMS AS AMENDED - PART II

| (Column 1) | (Column 2) | (Column 3) |
|--|------------------------------------|--------------------------|
| CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| 32 | 32 | 0 |
| 2 | 2 | 0 |
| PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | <input type="checkbox"/> |

| SMALL ENTITY TYPE <input type="checkbox"/> | | OR | OTHER THAN SMALL ENTITY | |
|--|----------------|----|-------------------------|----------------|
| RATE | ADDITIONAL FEE | | RATE | ADDITIONAL FEE |
| XS 9= | | OR | XS18= | |
| X43= | | OR | X86= | |
| +145= | | OR | +290= | |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

| (Column 1) | (Column 2) | (Column 3) |
|--|------------------------------------|--------------------------|
| CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| 29 | 32 | |
| 2 | 2 | |
| PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | <input type="checkbox"/> |

| SMALL ENTITY TYPE <input type="checkbox"/> | | OR | OTHER THAN SMALL ENTITY | |
|--|----------------|----|-------------------------|----------------|
| RATE | ADDITIONAL FEE | | RATE | ADDITIONAL FEE |
| XS 9= | | OR | XS18= | |
| X43= | | OR | X86= | |
| +145= | | OR | +290= | |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

| (Column 1) | (Column 2) | (Column 3) |
|--|------------------------------------|--------------------------|
| CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| | | |
| | | |
| PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | <input type="checkbox"/> |

| SMALL ENTITY TYPE <input type="checkbox"/> | | OR | OTHER THAN SMALL ENTITY | |
|--|----------------|----|-------------------------|----------------|
| RATE | ADDITIONAL FEE | | RATE | ADDITIONAL FEE |
| XS 9= | | OR | XS18= | |
| X43= | | OR | X86= | |
| +145= | | OR | +290= | |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

In column 1 is less than the entry in column 2, write "0" in column 3.
 Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20."